



2614
JW

PTO/SB/21 (02-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/516,983	
	Filing Date	01 MAR 2000	
	First Named Inventor	ELDERING	
	Art Unit	2614	
	Examiner Name	SHELEHEDA, JAMES R	
Total Number of Pages in This Submission	353	Attorney Docket Number	T702-02 (8007.3002CONT)

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Cited References (343 pgs.) Certificate of Mailing Return Receipt Postcard Copy of Electronic IDS Filing Fee Receipt	
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Douglas J. Ryder Reg. 43,073	
Signature		
Date	08/06/04	

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Typed or printed name	Patti Hespell	
Signature		Date 08/06/04

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on 8/6/04
Date

1. Transmittal (1 pg.)
2. Fee Transmittal in duplicate (2 pgs.)
3. Information Disclosure Statement (3 pgs.)
4. PTO SB/08A (2 pgs.)
5. Cited References (343 pgs.)
6. Copy of Electronic IDS Filing Fee Receipt (1 pg.)
7. Return Receipt Postcard


Signature

Patti Hespell

Typed or printed name of person signing Certificate

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CERTIFICATE OF MAILING(37 CFR 1.8)

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Date:

8/6/04

Patti Hespell

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

SERIAL NUMBER 09/516,983	FILING DATE 01 MAR 2000	FIRST NAMED INVENTOR ELDERING	ATTY. DKT. NO. 8887.3002CONT (T702-02)
TITLE SUBSCRIBER CHARACTERIZATION SYSTEM WITH FILTERS		ART UNIT 2614	EXAMINER SHELEHEDA, JAMES

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

INFORMATION DISCLOSURE STATEMENT

In accordance with the provisions of 37 C.F.R. §1.97, Applicants hereby wish to make of record the references listed on the accompanying PTO Forms SB/08A and 08B for consideration by the Examiner in the examination of the above-identified patent application. Copies of the patent documents are enclosed.

This Information Disclosure Statement is being submitted:

- ☐ (1) within three (3) months of the filing date, entry into national phase in an international application or before the mailing date of the First Office Action; or
- ☒ (2) after the period defined in (1) above but before the mailing date of a Final Rejection or Notice of Allowance, and
- ☐ Certification is made below, or
- ☒ The check, or authorization to charge deposit account no. **501535**, in the amount of the fee set forth by 37 C.F.R. §1.17(p) is attached.
- ☐ (3) after the mailing date of a Final Rejection or Notice of Allowance but before the payment of the Issue Fee, and

☐ Applicant hereby Petitions the Commissioner to consider the attached references; Certification is made below and the fee is included.

Attached hereto is Form PTO-SB/08A and 8B listing documents believed to be relevant to the above-captioned application. It is respectfully requested that these documents be considered by the Examiner. The relevance of each non-English document will be discussed as follows:

REMARKS:

This disclosure statement should not be construed as a representation that a search has been made or that no other material information as defined in 37 C.F.R. § 1.56(a) exists.

It is believed that this disclosure complies with the requirements of 37 C.F.R. §§ 1.56, 1.97, and 1.98, and the Manual of Patent Examining Procedures § 609. If for some reason the Examiner considers otherwise, it is requested that the undersigned be contacted by telephone promptly so that any deficiency can be remedied.

Some of the documents may have markings thereon. No significance is intended to be attached to the markings.

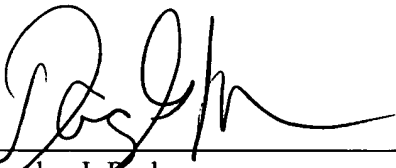
The submission of these documents is not intended to be deemed an admission that they constitute analogous art.

CERTIFICATION

Applicant(s) certify that:

- ☐ (1) Each item or reference was cited in a communication from a foreign patent office in a corresponding foreign application not more than three months prior to the filing date of the Statement; or
- ☐ (2) No item or reference was cited in a communication from a foreign patent office in a corresponding foreign application or, to the knowledge of the Applicant(s), was not known more than three months prior to the filing of the Statement.

Respectfully submitted,

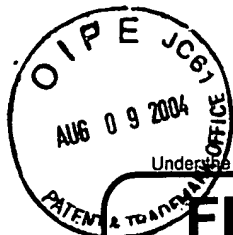


Douglas J. Ryder
Reg. No. 43,073

Date: 8/6/09

Expanse Networks, Inc.
6206 Kellers Church Road
Pipersville, PA 18947
(215)766-2100

PTO/SB/17 (10-03)
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PTO/SB/17 (10-03)

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$) 0.00**

Complete if Known

Application Number	09/516,983
Filing Date	01 MAR 2000
First Named Inventor	ELDERING
Examiner Name	SHELEHEDA, JAMES
Art Unit	2614
Attorney Docket No.	8887.3002 (T702-02)

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit
Account
Number
Deposit
Account
Name

501535

Expanse Networks, Inc.

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) or any underpayment of fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	770	2001	385	Utility filing fee	0.00
1002	340	2002	170	Design filing fee	0.00
1003	530	2003	265	Plant filing fee	0.00
1004	770	2004	385	Reissue filing fee	0.00
1005	160	2005	80	Provisional filing fee	0.00

SUBTOTAL (1) (\$) 0.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Independent Claims	Multiple Dependent	Extra Claims	Fee from below		Fee Paid
42	3		-52** = 0	9.00	0.00	
			-3** = 0	43.00	0.00	

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	86	2204	43	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$) 0.00

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1051	130	2051	65	Surcharge - late filing fee or oath
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet
1053	130	1053	130	Non-English specification
1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action
1251	110	2251	55	Extension for reply within first month
1252	420	2252	210	Extension for reply within second month
1253	950	2253	475	Extension for reply within third month
1254	1,480	2254	740	Extension for reply within fourth month
1255	2,010	2255	1,005	Extension for reply within fifth month
1401	330	2401	165	Notice of Appeal
1402	330	2402	165	Filing a brief in support of an appeal
1403	290	2403	145	Request for oral hearing
1451	1,510	1451	1,510	Petition to institute a public use proceeding
1452	110	2452	55	Petition to revive - unavoidable
1453	1,330	2453	665	Petition to revive - unintentional
1501	1,330	2501	665	Utility issue fee (or reissue)
1502	480	2502	240	Design issue fee
1503	640	2503	320	Plant issue fee
1460	130	1460	130	Petitions to the Commissioner
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)
1806	180	1806	180	Submission of Information Disclosure Stmt
8021	40	8021	40	Recording each patent assignment per property (times number of properties)
1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))
1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))
1801	770	2801	385	Request for Continued Examination (RCE)
1802	900	1802	900	Request for expedited examination of a design application

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 0.00

SUBMITTED BY

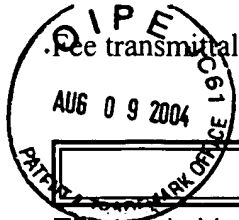
(Complete if applicable)

Name (Print/Type)	Douglas J. Ryder	Registration No. (Attorney/Agent)	43,073	Telephone	(215) 766-2100
Signature		Date	August 6, 2004		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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FEE TRANSMITTAL

Electronic Version v08

Stylesheet Version v08.0

Title of
Invention

Subscriber Characterization System with Filters

Application Number: 09/516983 *09/516983*
Date: 2000-03-01
First Named Applicant: Charles A Eldering
Attorney Docket Number: 8887.3002CONT
Art Unit: 2614
Examiner: James R Sheleheda

TOTAL FEE AUTHORIZED \$180

Patent fees are subject to annual revisions on or about October 1st of each year.

BASIC FILING FEE

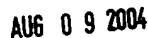
Fee Description	Fee Code	Amount \$	Fee Paid \$
Submission Of Information Disclosure Stmt Fee	1806	180	180

AUTHORIZED BILLING INFORMATION

The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit account number: 501535
Access Code ****
Deposit name: Expanse Networks, Inc.
Deposit authorized name: Patti Hespell
Signature: /plh/
Date (YYYYMMDD): 2004-08-05

Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.



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Substitute for form 1449/PTO

08/06/04

(Use as many sheets as necessary)

Sheet	1	of	2
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Complete if Known

Application Number	09/516,983
Filing Date	01 MAR 2000
First Named Inventor	ELDERING
Art Unit	2614
Examiner Name	SHELEHEDA, JAMES
Attorney Docket Number	8887.3002CONT (T702-02)

U. S. PATENT DOCUMENTS

[illegible]

FOREIGN PATENT DOCUMENTS

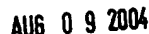
Examiner Initials*	Cite No. ¹	Foreign Patent Document	Publication Date	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	T ⁶
		Country Code ² -Number ⁴ -Kind Code ⁵ (if known)	MM-DD-YYYY			
	BU	CA2323166	04-13-2001	BACSO		
	BV	WO0049801	08-24-2000	YUEN		
	BW	WO9965237	12-16-1999	ISMAIL		
	BX	WO9952285	10-14-1999	HENDRICKS		
	BY	WO9960789	11-25-1999	KNEE		
	BZ	WO0022818	04-20-2000	YUEN		

Examiner Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹ Applicant's unique citation designation number (optional). ² See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

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08/06/04

(Use as many sheets as necessary)

Sheet 2

2

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2

Complete if Known

Application Number	09/516.983
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Filing Date	01 MAR 2000
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First Named Inventor	ELDERING
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Art Unit	2614
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Examiner Name	SHELEHEDA, JAMES
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Attorney Docket Number	8887.3002CONT (T702-02)
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U. S. PATENT DOCUMENTS

[illegible]

FOREIGN PATENT DOCUMENTS

Examiner Initials*	Cite No. ¹	Foreign Patent Document	Publication Date	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	T ⁶
		Country Code ³ -Number ⁴ -Kind Code ⁵ (if known)	MM-DD-YYYY			
	BAA	WO9966719	12-23-1999	ZIGMOND		

Examiner Signature		Date Considered	
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